

Vermont's Health Information Exchange Plan

Review of strategic planning process with key health system stakeholders



Key Terms

- **Health information** – administrative and clinical information created during care delivery supporting coordination of care, reimbursement, public health and quality reporting, analytics, and the policy and governance surrounding management of the health care system.
- **Health information exchange (HIE) *verb*** – the action of sharing health information among facilities, organizations, and government agencies according to national standards. HIE is often used as shorthand for programs, tools, and investments that help aggregate and exchange health information.
- **Health Information Exchange (HIE) *noun*** –an organization that collects health information electronically, manages it, and makes it available across the healthcare system. There is at least one HIE in almost every state in the nation, and HIEs offer a variety of services. In Vermont there is one HIE, referred to as the VHIE, which is operated VITL.

DVHA is Engaging HIE Stakeholders to Get Useful Feedback Now and Create an Ongoing Dialogue

Goals for this meeting:

1. Share current and future HIE work with the stakeholder community
2. Build awareness of how health information exchange matters will be governed beginning in 2019
3. Collect feedback on the 2019 plan and inform future planning efforts

Focus of the Last 20 Months: Restoring Confidence in the HIE Program

- Act 73 of 2017 called for an evaluation of how health information exchange is funded and managed.
- Act 187 of 2018 expanded legislative oversight to ensure recommendations from the Act 73 evaluation were implemented by DVHA and VITL.
- An annual strategic HIT Plan is mandated by law. Vermont has not had an approved plan since 2010.
- To date, the requirements of Act 187 have been met and DVHA is on track to submit an HIE Plan in November.

DVHA Convened a Steering Committee in Late 2017 to Support Development of an HIE Plan

Name	Role	Reason for Selection	Voting
Michael Costa	Chair	Agency designated program sponsor for HIE/HIT	Voting
Leah Fullem	ACO Lead	Vermont's health care reform goals rely heavily on ACOs	Voting
Kelly Lange	Insurance Lead	Investments should be aligned across payers.	Voting
Simone Rueschemeyer	Community Provider Lead	Representative a behavioral health services and data exchange.	Voting
Craig Jones	National & State HIE Perspective	National thinker on HIT/HIE with VT delivery system experience.	Voting
Andrew Laing	Technologist	Information systems SME; ADS Representative (Chief Data Officer)	Voting
Tracy Dolan	Public Health Lead	Public Health data exchange is essential to successful HIE, and it is a focus of federal incentive programs	Voting
Kristina Choquette	VITL Lead	VHIE Representative	Non-Voting
Beth Tanzman	Practice Innovation Lead	Blueprint for Health is considered a key stakeholder in practice level health care reform.	Non-Voting
Emily Richards	HIE Program Lead	DVHA's HIE Program Director overseeing HIE contracts, federal plans and funding requests, and the HIE Team.	Non-Voting

The Steering Committee Created Norms for Committee Work While Examining Vermont's HIE Needs

Creating Norms

- Demystify health information exchange by clearly articulating where we've been, the current state, and where we're going
- Target the needs of the people using the health system (not solely the technology)
- Emphasize the interdependent component parts required to achieve success – Technology, Financing, Policy/Process and Governance
- Focus on achievable progress in clear alignment with desired outcomes

HIE Needs

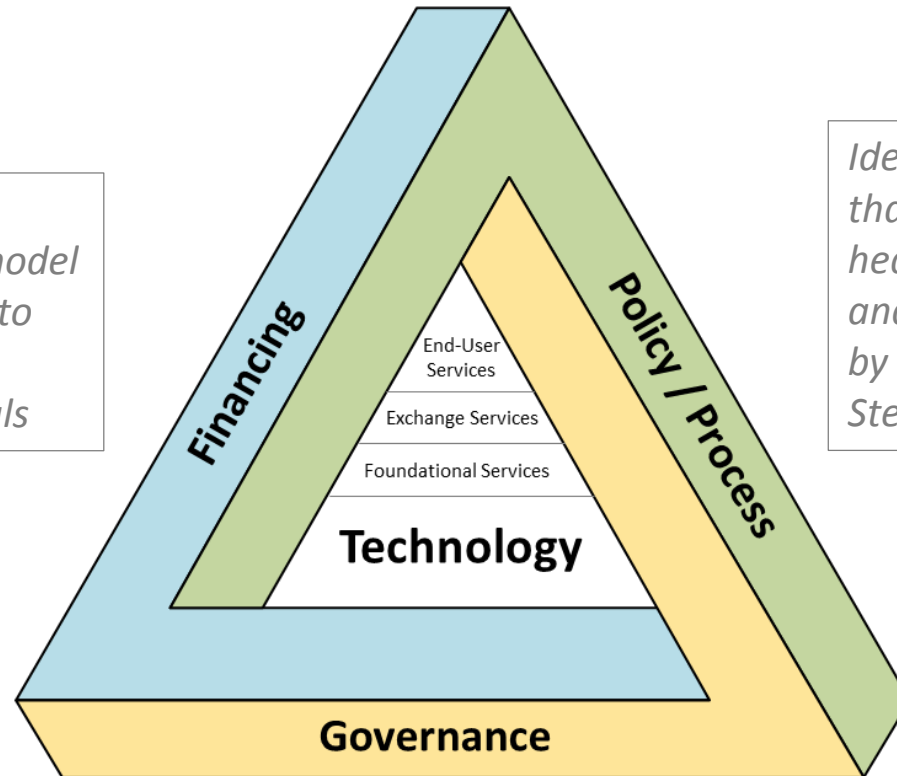
- Created an initial library of use cases setting forth specific HIE needs
- Focused on delivering a credible and timely HIE plan
- Focused on foundational elements of HIE, particularly effective governance and specific future work

The HIE Plan Focuses on the Basic, Essential Elements

- A History of HIE in Vermont
- Establishing a Framework for Success
 - The HIE Ecosystem
 - Three Tiers of HIE Technology
- Governing HIE in Vermont
- HIE Sustainability
- Objectives & 2018-2019 Tactical Plan
- Future HIE Planning Considerations

The HIE Ecosystem is a Focal Point – *the environment required for HIE to effectively function*

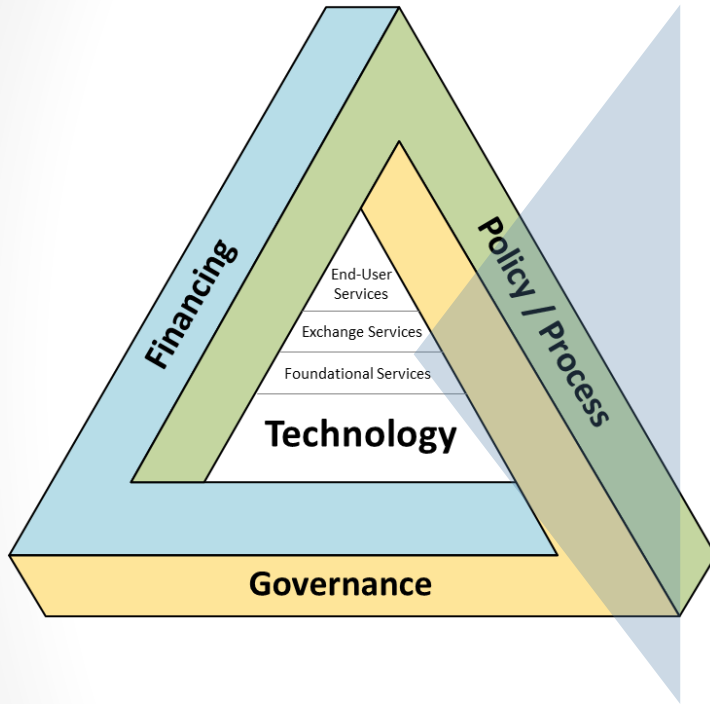
Ideal state: A sustainable public/private financing model leverages diverse sources to support the state's health information exchange goals



Ideal state: Sharing of data sources that constitute an individual's entire health profile are supported by state and federal policy. Policies are driven by the state-wide HIE Plan and HIE Steering Committee.

Ideal state: Policymakers and health care organizations synchronize HIE efforts with the State's HIE governance body. A clear strategic plan underpins the state's HIE Governance Model.

HIE Technology: Building Blocks of Success



End-User Services		
Reporting Services	Notification Services	
Analytics Services	Portals & On Demand Data Feeds	
Care Coordination Tools	Patient Attribution & Dashboards	
Exchange Services		
Data Extraction & Aggregation		Data Access
Interoperability	Data Quality	Data Governance
Foundational Services		
Identity Management	Consent Policy & Management	
Security	Provider Directories	
Financing	HIE Policy & Process	
Governance		

The HIE Plan Focuses on a Small Number of Clear Multi-Year Goals

Create One Health Record for Every Person - Support optimal care delivery and coordination by ensuring access to complete and accurate health records.

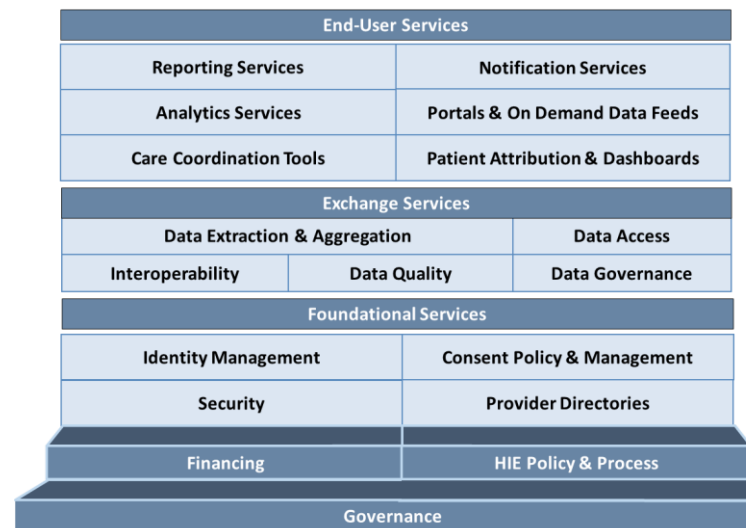
Improve the Efficiency of Health Care Operations - Enrich health care operations through data collection and measurement to support quality improvement and reporting.

Use Data to Enable Investment and Policy Decisions - Bolster the health system's ability to learn and improve by providing accurate, comprehensive data to guide investment of time, labor and capital, and inform policy making and program development.

Note: Detailed explanation of goals and the supporting objectives is available in the resource slides at the end of the slide deck.

The HIE Plan Features a Tactical Plan to Make Progress towards our Goals in 2019

- The specific focus for 2018 and 2019 is:
 - Establishing the permanent governance model for the HIE
 - Incremental progress in:
 - Consent management
 - Data quality
 - Identity management
 - Initiating long term, sustainable financial planning
 - Overseeing the 2018-2019 plan and developing a 2020 plan, including a technical roadmap
- Tasks touch on all parts of the HIE Ecosystem and are delineated as foundational, exchange and end-user services



The HIE Plan Proposes an HIE Governance Model the State Intends to Implement

- The HIE Governance Model is focused on:
 - Serving the needs of HIE users by advancing HIE use cases;
 - Strengthening the relationship between authority and accountability; and
 - Engaging a broad range of stakeholders in strategic planning and oversight activities

Excerpt from the Executive Summary of the 2017 Evaluation Report

“Vermont is not organized in a way that increases its chances for success. Currently, no group or organization is solely responsible for the execution of HIE activities in the state, and there is no statewide strategic plan guiding time constrained HIE investments...Better governance and planning is attainable - other states have successfully developed governance and oversight models, which Vermont could replicate.”

Clear Roles and Goals are the Key to Vermont's HIE Governance Model

Where do stakeholders convene to discuss HIE matters, set priorities and propose policy?

HIE Steering Committee

The HIE Steering Committee develops, executes and evaluates the HIE Plan and monitors HIE performance with operational and administrative support from DVHA's HIE Unit.

Where do decision makers go for support?

Stakeholder Advisory Groups

The HIE Steering Committee actively leverages insights and expertise from existing stakeholder advisory groups and creates ad-hoc committees when needed.

Who is responsible for oversight?

Green Mountain Care Board

The GMCB approves the statewide HIE Plan and VITL's budget.

Who provides HIE services?

VHIE & Other HIE Service Organizations

The VHIE and other HIE service vendors such as Bi-State Primary Care Association and OneCare Vermont.

How are service providers held accountable?

Performance-Based Contracts

The Steering Committee sets strategy to drive investment and works with DVHA and other contract owners to ensure contracts drive performance goals.

The HIE Steering Committee Membership is Expected to Grow

- Committee roles are based on needs and challenges presented in the use cases.
- The main, permanent body will consist of representatives from the following:
 - Vermont's Agency of Human Services (Chair)
 - Vermont's Department of Health
 - A Payer (insurance carrier)
 - A Minimum of 3 Provider Representatives (in service of patients) of:
 - Primary Care
 - Mental Health
 - Substance Use Disorders
 - Long-Term Services and Supports
 - Hospital Care
 - A Person who Engages with the Health Care System
 - An Accountable Care Organization
 - The Blueprint for Health Program
- *Non-voting members will include, but not be limited to, representatives from:*
 - The Green Mountain Care Board
 - The Agency of Digital Services
 - The Department of Vermont Health Access' Health Information Exchange Unit

The Steering Committee will have Clear Responsibilities

- Support development, execution and oversight of Vermont's HIE Plan.
- Continue to grow and evolve the HIE Steering Committee to best meet the State's needs.
- Support DVHA and other stakeholders in focusing HIE investments to align with state-wide HIE goals.
- Support development of processes and policies that enable achievement of state-wide HIE goals.
- Engage stakeholders in the Steering Committee's work.

Note: See resource slides for an expanded list of responsibilities.

RESOURCE SLIDES

The Steering Committee's Charge

The Steering Committee's Vision

To enable health information exchange that promotes quality healthcare in Vermont.

The Steering Committee's Mission

To work across organizations and disciplines to create and endorse a shared view of the definition, purpose, and goals of HIE in Vermont.

The Steering Committee's Guiding Principles

- We commit to creating an HIE Plan that is accurate, reliable and actionable.
- We drive to use technology and data to support value based care.
- We are accountable for meaningful work that furthers the goals of HIE.
- We work to optimize what exists today and be thoughtful about future developments.
- We are good stewards of limited public and private resources.
- We exist to develop systems that better the health and well-being of Vermonters.

Goal 1: One Health Record for Every Person

To ensure data is available to providers when they need it, the system requires that each person have an electronic health record, often referred to as a Longitudinal Health Record. This record must include a complete, historical view of care that spans transitions of care and insurance carriers and which is secure and confidential yet accessible, under reasonable permissions, to each person and his/her designated care team, including relatives and friends. To support this goal, the State and its partners strive to:

- Define the requirements (what must be included) of a Longitudinal Health Record.
- Create an easy-to-navigate Longitudinal Health Record for all people accessing Vermont's health system. Viewing the health record should not add additional burden to provider operations.
- Empower people to participate in their care by providing them access to their secure and complete health record and a mechanism for managing their data sharing preferences.
- Further real-time exchange of health records to support direct care, care coordination, and efficient transitions of care.
- Remove policy, process and economic barriers to ensure complete health data follows the person and are not "stuck" in a care setting.
- Support adoption and use of electronic health records and other technologies across the full spectrum of care delivery.
- Integrate data sources to seamlessly represent a person's entire health profile for those measuring care systems and providing care and services.

Goal 2: Improved Efficiency of Health Care Delivery Operations

Healthcare delivery and management in Vermont relies on and requires an array of data sets to support an ever-expanding need for analysis of health system's performance. Today, the needed data acquisition and aggregation are supported unevenly and inconsistently, and the burden often falls more heavily on smaller practices. To fully support health systems in using real data to bolster operations, the State and its partners strive to:

- Define the priority elements (information) required to support health system reporting and analysis.
- Integrate data sources to seamlessly represent a person's entire into a health profile for those measuring care systems and providing care and services.
- Provide designated health care organizations and programs with high quality, reliable data to support measurement and reporting needs of various groups and users.

Goal 3: Data-Informed Investments

The information required for data-informed delivery and management is produced in a learning cycle where care delivery provides data supporting assessment and analysis that, in turn, produces better decision making and investment in time, resources and capital. To bolster the health system's ability to learn and improve, the State and its partners strive to:

- Integrate systems and coordinate stakeholder efforts in support of shared continuous improvement goals.
- Provide policy makers and health system stakeholders with aggregate data to support evaluation and program decision making.
- Support health care organizations and programs with access to aggregate data to inform investment decisions that maximize use of limited resources and promote positive health outcomes.

Steering Committee Responsibilities (Expanded)

- **Support development, execution and oversight of Vermont's HIE Plan.**
 - Annually, develop and/or update the HIE Steering Committee charter and bylaws to clearly define roles of members, voting procedures, and other essential operational functions.
 - Annually, update the State's HIE plan to support the health system's needs and priorities. The plan must comply with state law and guidance provided by the Green Mountain Care Board (GMCB) through the annual plan review process.
 - Develop and maintain a technical roadmap to support the State's HIE network and achieve the goals stated in the HIE Plan.
 - Oversee and manage activities set forth in the annual HIE plan.
- **Continue to grow and evolve the HIE Steering Committee to best meet the State's needs.**
 - Identify growth opportunities for the governance body and assign ad-hoc committees as needed (e.g., data governance, connectivity, finance, audit).
 - Act as the central point of review for new or adjusted priorities with HIE stakeholders.
 - Identifying alignment opportunities to further integrate the state-wide data management architecture.
- **Support DVHA and other stakeholders in focusing HIE investments to align with state-wide HIE goals.**
 - Monitor HIT Fund expenditures and other state-driven HIE investments and identifying opportunities for greater diversity in HIE funding sources.
 - Review federal funding requests managed by AHS to ensure alignment with state-wide strategy.
 - Define the portfolio of investments needed to further HIE goals and, annually, refine the HIE financial sustainability model through evaluation of progress made in the preceding year.
- **Support development of processes and policies that enable achievement of state-wide HIE goals.**
 - Provide recommendations to the legislature, GMCB and other stakeholders on actions they can take to support the State's HIE plans and goals and support the development of policy and legislation to further statewide HIE goals and objectives.
 - Identify priority policies that must be focused on to expand interoperability of health information.
 - Review and provide feedback on policies developed by AHS, the VHIE, and other stakeholders related to the exchange of health data.
- **Engage stakeholders in the Steering Committee's work.**
 - Actively and consistently engage with existing stakeholder advisory groups to ensure that planning and implementation considers insights from all impacted and interested parties.

Use Case Questions

- What is your role (job)?
- Are you responsible for providing health data, using data, or both?
- How do you use health data to support your work? If you don't have access to health data, describe how having access to the correct data would add value to your work.
- Do your data needs change depending on the role you are playing or job you are doing?
- Where does the health data you rely on come from?
- Who or what do you rely on for the data you need? How do you access the data?
- Is patient consent required for you to access the data you need?
- Are there any restrictions on your use of the data or challenges in access the data you need?
- Are there any changes that could be made to improve your ability to access the data you need?
- Can you describe a scenario in which you have sufficient health data to fully support you in your role? What would that data be and where and how would you access it?
- What are the consequences of not having the data you need (the “correct” data)?
- Complete the following: As a [blank] I want to be able to [blank] so that I can [blank]
- Is there anything you'd like to add about how you use health data, the challenges you face when trying to access the data you need, and/or your ideal future state?